

D.I. # _____

CIVIL ACTION**NUMBER:** 07cv 469U.S. POSTAL SERVICE
CERTIFIED MAIL RECEIPT(S)

7003 1680 0002 2585 9479

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
<i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$ 505
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 985

Sent To: LOREN MEYERS
 Street, Apt. No., or PO Box No.: DEPUTY ATTORNEY GENERAL
 City, State, ZIP+4: DEPARTMENT OF JUSTICE
 820 N. FRENCH STREET

PS Form 3800, June 2002 See Reverse for Instructions

7003 1680 0002 2585 9462

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
<i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$ 505
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 9.85

Sent To: WARDEN TOM CARROLL
 Street, Apt. No., or PO Box No.: DELAWARE CORRECTIONAL CENTER
 City, State, ZIP+4: 1181 PADDOCK RD.
 SMYRNA DE 19977

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